



OFFICE OF THE SECRETARY OF THE STATE

**MAILING ADDRESS:**

Commercial Recording Division  
Connecticut Secretary of the State  
P.O. Box 150470  
Hartford, CT 06115-0470  
860-509-6003

**DELIVERY ADDRESS:**

Commercial Recording Division  
Connecticut Secretary of the State  
30 Trinity Street  
Hartford, CT 06106  
860-509-6003

**APPLICATION FOR CERTIFICATE OF RENEWAL OF A REGISTERED MARK**

*(Can be filed only within 6 months prior to the expiration of a registration)*

**Filing Fee: \$50.00**

**Make Checks Payable To "Secretary of the State"**

**1.** Name of Record Owner:

**2.** State of Formation of the Owner *if other than a natural person*:

**3.** New Address of Owner (if applicable):


**4.** Connecticut Registration Number: \_\_\_\_\_

The owner of the mark, which is the subject of this application, asserts that the mark has been and is still in use in Connecticut. The owner hereby applies for renewal of the registration bearing the number stated in Number 4 above.

**EXECUTION:**

I hereby declare under the penalties of false statement that the statements made in the foregoing application is true.

**5.** \_\_\_\_\_ **6.** \_\_\_\_\_ **7.** \_\_\_\_\_  
Date Name of Signatory Title of Signatory *if applicable*

**8.** \_\_\_\_\_  
Signature

**9.** *The applicant must submit three specimens or photographs of the mark as actually used in this state.*